MedLab DIAGNOSTICS By SHEOWS

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DELHI - HARYANA - UTTAR PRADESH AN ISO 9001:2015 CERTIFIED LABORATORY

Patient Name	: Mr. SANJEET KUMAR	**Patient ID**	: HR25025000181
Age/Sex	: 45 Years / Male	**Serial No**	: 8
Referred by Dr.	: Mohit(M.B.B.S)	**Register On**	: 06-April-2026
Sample From	: SURAJ DIAGNOSTIC	**Printed On**	: 23-April-2026
Lab ID	:		

BIOCHEMISTRY

KIDNEY FUNCTION TEST

Investigation	Observed Value	Unit	Biological Ref Range
BLOOD UREA	12.89	mg/dl	10.00 - 50.00
SERUM CREATININE	1.23	mg/dl	0.60 - 1.50
SERUM URIC ACID	4.67	mg/dl	3.40 - 7.00
SODIUM (NA +)	132	mEq/L	130.00 - 155.00
POTASSIUM (K +)	4.90	mEq/L	3.50 - 5.50
SERUM CHLORIDE	**67**	mEq/L	96.00 - 106.00
CALCIUM	8.90	mg/dl	8.40 - 11.50
PHOSPHOROUS	3.45	mg/dl	2.50 - 5.00
BLOOD UREA NITROGEN (BUN)	**6.02**	mg/dl	7.90 - 20.00
BUN/CREATINE RATIO	**4.9**	mg/dl	9.00 - 23.10
UREA/CREATNINE RATIO	10.48	Ratio	
eGFR	**73.78**	mL/min/1.73 m2	> 90: Normal GFR 60-89 : Mild decrease in GFR 30-59 : Moderate decrease in GFR 15-29 : Severe decrease in GFR <15 : Kidney failure
CKD STAGE	G2		

Bhogendra Singh
Lab Technician
DMLT Bsc MLT

Dr.Kajal Mehra
Consultant Pathologist
MD. Path

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BIOCHEMISTRY

Comment : Urea is the end product of protein metabolism. It is synthesized in Liver from Ammonia produced by the catabolism of amino acids. It is transported by blood to Kidneys,
from where it is excreted.Increased levels are found in renal diseases, urinary obstructions, shock, Congestive Heart Failure and burns.Decreased levels are found in Liver failure and pregnancy.
Creatinine is the catabolic product of Creatinine Phosphate, which is used by the skeletal Muscle.The daily production depends on muscular mass and it is excreted out of the body entirely by the Kidneys.Elevated levels are found in renal dysfunction, reduced renal blood flow shock, dehydration, Congestive Heart Failure, Diabetes Acromegaly. Decreased levelsare found in Muscular Dystrophy.Uric acid is the end product of purine metabolism.Uric acid is excreted to a large degree by the kidneys and to a smaller degree in the intestinal tract by microbial degradation.
Increased levels are found in Gout, Arthiritis, impaired renal functions and starvation.Decreased levels are found in Wilson's disease, Fanconis Syndrome and Yellow Atrophy of Liver.

** END OF REPORT **

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